

PTO/SB/80 (11-04)

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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

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☒ Practitioner associated with the Customer Number:

24738

OR

☐ Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

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as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

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Assignee Name and Address:

KONINKLIJKE PHILIPS ELECTRONICS N.V.
Groenewoudseweg 1
5621 BA Eindhoven, The Netherlands

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SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature	<i>Michael E. Marion</i>	Date	02 FEB 2005
Name	Michael E. Marion	Telephone	(914) 333-9637
Title	Authorized Representative		

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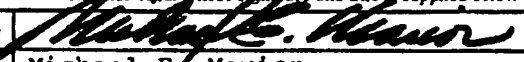
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